## The Role of the Laparoscopic Nurse Practitioner



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Colchester Laparoscopic

Surgical Care Practitioner: Laparoscopic Surgery

#### What's in a Name

- Surgical assistant
- □ Nurse practitioner
- □ Sister
- □ Doctor
- □ Registrar
- □ Consultant!



## Career History

- □ Trained in Dublin
- □ Worked in the USA
- □ Came to Colchester
- □ Staff nurse in theatre
- □ 1995 became a theatre sister in laparoscopic/vascular speciality

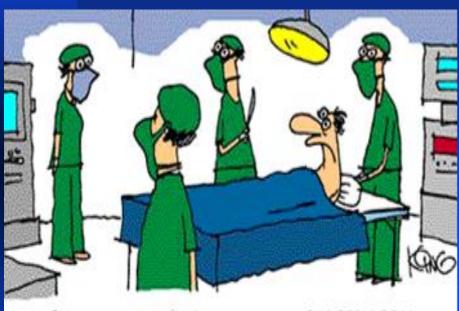


#### How the Role Evolved

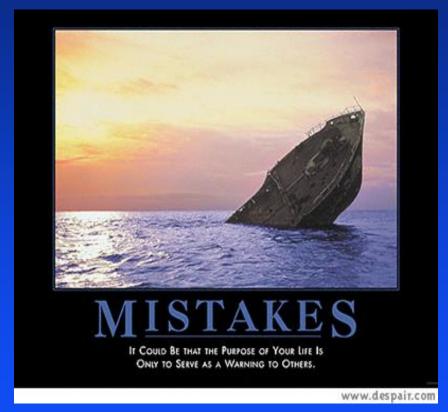
- □ Career aspirations
- □ Planning
- □ Job description
- □ Support: individuals and from the Trust
- Business case.



# Why Have a Laparoscopic Nurse?



"Nurse, get on the internet, go to SURGERY.COM, scroll down and click on the 'Are you totally lost?' icon."



Colchester Laparoscopic

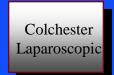
## Why a Laparoscopic Nurse

- ☐ Group of patient's who have needs just like any other patients.
- □ Preadmission service, truly informed consent.
- □ List planning
- □ Someone to be responsible for equipment issues and purchasing of new.



#### Political Influences

- ☐ Department of Health / NHS Plan
- □ Working Time Directive.
- □ Changing Workforce Programme
- Modernisation Agency
- □ Skills for Health



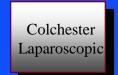
#### Preadmission Service

- □ Not nurse led important part PRHO training
- ☐ Important to have a dedicated anaesthetist
- Liaison with anaesthetist.
- □ Allows better list planning.
- Order invest. Bloods, ECG, Echo and spirometry: not Xrays yet.
- Commence therapeutic relationship with the patient.



#### Theatre Role

- Surgical Assistance for Consultant /Registrar.
- □ Surgical activity: closing wounds formation stoma, etc.
- Minor Ops list.
- □ Arrange additional op time for elective and emergency patients.



## Outpatient Clinics.

- ☐ Pre operative assessment at first outpatient attendance.
- □ Aim to put patient's on the waiting list when they are fit.
- Move towards patient involved admission.
- □ Post op follow ups



#### Education

- □ Qualified 1984
- □ Diploma in Pharmacology 1985
- □ CGFNS 1986
- □ State Boards 1987
- ☐ Advanced lap course 1993
- ☐ Basic Lap course 1994
- □ ENB N 77, Basic Surgical Skills: 1998.
- □ Bsc (hons) 2003.
- □ Msc May 2006.
- □ Independent nurse prescriber 2006



## Role From a UK Standpoint.

- □ Milton Keynes
- Bedford Hospital
- □ Yeovil
- □ Tyneside.
- ☐ Bristol.



### Accountability

- ☐ I am accountable for everything I do, the surgeon does not cover me.
- □ Vicarious liability, job description, need to keep up to date.
- □ MDU membership.
- □ Only covered to work in an NHS facility.
- □ Accountable to Prof of surgery for my work.
- Nursing accountability via Nurse Consultant



#### Associations

- National Treasurer of NAASP
- ☐ Chairman of ALTS
- Member of NATN
- □ Member of MDU.
- Member RCN



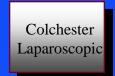
## Changes to Service

- □ Implementation Day case Lap Chole
- ☐ Introduction of Enhanced Recovery programme for laparoscopic colorectal surgery.
- ☐ Assist with achieving 62 day target (see to treatment) for cancer patients
- Reduction in waiting list times and meeting 6 month target for all elective surgery now working to 18 week pathway.
- ☐ Acute surgical wound specialist.



## Future of the Role and Lap Services at Colchester.

- Outpatient clinic see all routine follow ups patient satisfaction questionnaire.
- ☐ Employ another SCP, course coordinator, secretary and data collector
- □ Build purpose built education centre: ICENI
- Common thread through all episodes of the patient journey and 5 day stay ward
- Audit and evaluation.



#### Work Schedule

| DAY       | AM            | PM                        |
|-----------|---------------|---------------------------|
| Monday    | Pre admission | Pre admission             |
| Tuesday   | Day surgery   | Main theatres             |
| Wednesday | Main theatres | Admin                     |
| Thursday  | Outpatients   | Minor ops<br>D/Surg       |
| Friday    | Main theatres | Main theatres  Colchester |

Laparoscopic

## In Addition, some other Daily Tasks

- □ Visit patients pre and post operatively.
- ☐ Liaise with anaesthetists and chase various investigations.
- □ Meet with reps re new equipment.
- □ Liaise with secretaries ,admissions people, bed managers etc.
- ☐ Go through notes to plan appropriate admission.
- Managing waiting list for 4 lap colorectal Consultants.



#### Member of a Team

Most importantly I work as part of a team





### Questions?

Thank you for your time.



## PESSIMISM

EVERY DARK CLOUD HAS A SILVER LINING, BUT LIGHTNING KILLS HUNDREDS OF PEOPLE EACH YEAR WHO ARE TRYING TO FIND IT.